

the health and well being of America's veterans.

Mr. FILNER. Mr. Speaker, I rise in support of the Veterans' Millennium Health Care Act. This bill improves the VA health care system in many ways. For example, it will extend long term care and emergency care services, provide sexual trauma counseling, expand care and treatment for veterans who have been recognized by the award of the Purple Heart.

In addition, I am especially pleased that this legislation ensures that the Veterans Administration (VA) will work with licensed doctors of chiropractic care to develop a policy to provide veterans with access to chiropractic services. Even though chiropractic is the most widespread of the complementary approaches to medicine in the United States, serving roughly 27 million patients—and even though Congress has recognized chiropractic care in other areas of the federal health care system (Medicare, Medicaid, and federal workers compensation), VA has chosen not to make chiropractic routinely available to veterans. This bill changes that.

As a Member representing a portion of San Diego County, I am also pleased that H.R. 2116 includes a biomedical research facility for the VA San Diego Healthcare System to accommodate current and pending research programs on diabetes, immunology, hypertension, Parkinson's Disease, AIDS, and memory.

I encourage my colleagues to support and vote in favor of the Veterans' Millennium Health Care Act.

Mrs. KELLY. Mr. Speaker, I rise today in opposition to H.R. 2116, the Veterans Millennium Health Care Act, in its present form. This is a position I take after a great deal of deliberation and review of the effects of some of the provisions in this legislation.

I want to begin by recognizing the many positive initiatives contained in this legislation that will truly benefit our veterans population, such as the requirement for long term care for veterans with 50 percent or greater service connected disability. This issue is one of my highest priorities in Congress and is the reason I introduced H.R. 1432, the Veterans Long Term Care Availability Act, which requires, essentially, the very same thing. Additionally, the provisions that provide coverage for emergency care services to veterans, priority care for Purple Heart recipients and expansion of the enhanced use lease authority available to VA facilities with extra unused space are all good initiatives that I wholeheartedly support.

Unfortunately, these good provisions are coupled with two problematic provisions that we should be given the opportunity to offer amendments to correct. By suspending the rules to pass this bill we are unable to offer amendments to correct some of the bill's problems. For instance, Section 107 of this legislation, entitled "Enhanced services program at designated medical centers," sounds like a good program. In reality, however, this section stipulates the conditions under which a VA hospital can be closed. This is a very important process before us now that entails a great deal of controversy that should be debated on its merits. I have to question why we would want to put into place a procedure for closing VA hospitals in a time when we are facing unprecedented growth of the health care needs of veterans. One of the stipulations of this section is that Congress gets 30 in session days

to review the VA's findings. I believe this period should be longer. We all know that Congress was intentionally created to be a very deliberative body. If we are going to have an opportunity to review such a report we will need more than 30 days to do so.

Additionally, Section 201 entitled "Medical care collections," would enable the VA to raise co-payments that veterans would be required to pay on their prescription drug benefits. Veterans I have spoken to in my area are frustrated enough with the current co-payments they are required to pay. The typical veteran from New York is poorer, sicker and older than the rest of the nation. The current prescription drug benefits that veterans have are one of the few benefits that genuinely helps them. If we need more money we should appropriate it, not charge veterans.

Finally, the question that comes to my mind is the cost of this legislation. CBO testified before the House Veterans Affairs Committee that this bill would cost \$1.4 billion a year to implement. Where are we going to get this money. The last thing Congress should do is pass costly mandates upon the VA without passing appropriate funding. If we fail to pass appropriate proper funding, the VA will be forced to cut back or end other services in order to comply with these new mandates. This year the House has passed a VA-HUD Appropriations Act that increases VA spending by \$1.7 billion. This level is currently in question and I wonder if we will be able to achieve it. With the funding requirements this bill would incur, where is the money going to come from? Do we have a commitment to provide a \$1.4 billion increase next Congress? This is one of the questions that must be answered before we pass such a large bill. We cannot afford to short change veterans.

Finally, the supporters of this bill speak of the many endorsements H.R. 2116 has received from national veterans groups. I have contacted these groups and found that many of them agree with my concerns. Let me quote from a letter from Richard Esau, Jr., the National Commander of the Military Order of the Purple Heart.

H.R. 2116 was "the topic" of conversation at our Convention. We concur completely with your evaluation of this bill. Yes, we need long term care for veterans with service connected disability of 50 percent or greater. Yes, we need VA provided emergency care services and most assuredly we need priority care for Purple Heart recipients and military retirees. If a percentage of these funds is to be recovered via the Federal tobacco lawsuit, so be it. I can't ever remember a C-ration package that didn't have a cigarette pack in it.

Congresswoman, we couldn't agree more with your concerns about the bill's procedures for closing VA hospitals. You have only to look at the State of Maine to see how the laissez faire attitude of federal bureaucrats is working a hardship on thousands of veterans who soon will have to travel from their homes (some on the Canadian border) to Boston, Massachusetts for treatment. Further, we wouldn't want the VA Secretary to have the authority to increase prescription co-payments for veterans with service connected disabilities of less than 50 percent. Too often, the VA Secretary is a political animal who has never had a shot fired at him in anger. This type of Secretary just doesn't seem to understand how important medicines are to older vets and what a slap in the face it is to require them to pay more rather

than less for this service. Do other Members of Congress realize a plurality of these veterans are on fixed incomes?

I personally would like to see your bill, H.R. 1432, taken out of committee and debated on the floor of the House. I am, however, a realist who knows that "half a loaf" is better than none. Therefore, along with my fellow patriots, I support passage of H.R. 2116 and ask you, Sue Kelly, to continue your watchdog activities to ensure vets have their medicines at reasonable prices and needed "old" VA facilities stay open.

As we see from this letter, veterans are ready to take the good portions of this bill along with the bad portions of this legislation. We should pass the best bill possible, not a good and bad bill. We should allow for a full and open debate of these provisions and take H.R. 2116 off the suspension list and allow amendments. It is only through the full open democratic process that we can ensure that all sides are properly represented. If this bill fails tonight when the full House votes, I pledge to do everything in my power to ensure that this bill is given the proper time for full House consideration of all germane amendments.

I am joined in opposition by members who want only the best for our veterans and the Eastern Paralyzed Veterans Association. I urge members on both sides of the aisle to carefully consider these issues before casting their vote on this all too important legislation.

Ms. JACKSON-LEE of Texas. Mr. Speaker, I rise in support of H.R. 2116. This bill makes a number of important changes to veterans' health care programs.

The bill directs that the VA operate and maintain a national program of extended care services, including geriatric evaluations, nursing home care, adult day health care, domiciliary care and respite. The measure requires the VA to develop and begin to implement by January 1, 2000 a plan for carrying out the recommendation of the Federal Advisory Committee on the Future of Long Term Care. The VA was directed to increase home and community based care options as well as the percentage of the medical care budget dedicated to such care. The bill mandates the VA to provide needed extended care services in the case of veterans who are 50% service connected or in the need of such care for a service connected condition; and provide such veterans highest priority for placement in VA nursing homes.

Although the calendar year indicates that we honor these men and women on Memorial Day and Veteran Day, I believe that we should pause everyday to thank them for their sacrifice. The collective experience of our 25 million living veterans encompasses the turbulence and progress America has experienced throughout the twentieth century. This nation's veterans have written much of the history of the last hundred years. They have served this nation without reservation or hesitation during its darker moments.

Their unwavering devotion to duty and country has brought this nation through two World Wars and numerous costly struggles against aggression. From World War I to the Gulf War, America's veterans have been leading this nation against those who have threatened the values and interests of our nation.

Only today are the accomplishments and sacrifices of our veterans being fully appreciated by historians and the public. These genuine heroes have often been ignored and